



17:41 FAX 7172375300

McNees Wallace & Nurick

005/006

SEP 26 2003

JC40

PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: **Mail** Mail Stop ISSUE FEE
Commissioner for Patents
Alexandria, Virginia 22313-1450
Fax (703)746-4000

INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 4 should be completed where appropriate. All further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated unless corrected below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fee notifications.

CURRENT CORRESPONDENCE ADDRESS (Note: Legibly mark up with any corrections or use Block 1)

31450 7590 08/01/2003

MCNEES WALLACE & NURICK LLC
100 PINE STREET
P.O. BOX 1166
HARRISBURG, PA 17108-5300

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I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Box Issue Fee address above, or being facsimile transmitted to the USPTO, on the date indicated below.

Lindsay Vican	(Depositor's name)
<i>Lindsay Vican</i>	(Signature)
September 26, 2003	(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/086,148	10/22/2001	Joseph David Rigney	13DV13878	4144

TITLE OF INVENTION: METHOD FOR REPLACING A DAMAGED TBC CERAMIC LAYER

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1300	\$300	\$1600	11/03/2003

EXAMINER	ART UNIT	CLASS-SUBCLASS
ROSENBAUM, IRENE CUDA	3726	029-889100

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

 Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.

2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

Carmen Santa Maria

McNees Wallace & Nurick LLC

3. _____

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. Inclusion of assignee data is only appropriate when an assignment has been previously submitted to the USPTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

General Electric Company

Schenectady, NY

Please check the appropriate assignee category or categories (will not be printed on the patent) individual corporation or other private group entity government

4a. The following fee(s) are enclosed:

 Payment of Fee(s): Issue Fee A check in the amount of the fee(s) is enclosed. Publication Fee Payment by credit card. Form PTO-2038 is attached. Advance Order - # of Copies 5 The Commissioner is hereby authorized to charge the required fee(s), or credit any overpayment, to Deposit Account Number 50-1059 (enclose an extra copy of this form).

Commissioner for Patents is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above.

(Authorized Signature)	(Date)
------------------------	--------

Carmen Santa Maria

9/26/03

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02 FC:1504	300.00 DA
03 FC:8001	15.00 DA

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OCT 28 2003 17:39 FAX 7172375300
McNees Wallace & Nurick
attorneys at law

001/006

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FAX COVER LETTER

DATE: September 26, 2003

Routing #391
Client #07783-0094

PLEASE DELIVER THE FOLLOWING PAGES:

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FROM: Carmen Santa Maria Direct Dial: (717) 237-5226

TOTAL NUMBER OF PAGES, INCLUDING THIS COVER LETTER: 6

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Please Acknowledge Receipt of Documents.

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PARALEGAL RESPONSIBLE: Lindsay Vican TELEPHONE: (717) 237-5289

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Signature

Lindsay Vican

Typed or printed name of person signing Certificate

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Fee Transmittal Form

Transmittal Form

Issue Fee Transmittal

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PTO/SB/17 (01-03)

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SEP 26 2003

JCO
PATENT & TRADEMARK OFFICE

FEE TRANSMITTAL for FY 2003

Effective 01/01/2003. Patent fees are subject to annual revision.

 Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$ 1615)

Complete if Known	
Application Number	10/086,148
Filing Date	10/22/2001
First Named Inventor	RIGNEY et al.
Examiner Name	Irene Cuda Rosenbaum
Group / Art Unit	3726
Attorney Docket No.	13DV-13878 (07783-0094)

METHOD OF PAYMENT (check all that apply)

 Check Credit card Money Order Other None
 Deposit Account:

Deposit Account Number

60-1059

Deposit Account Name

McNees Wallace & Nurick LLC

The Commissioner is authorized to: (check off that apply)

 Charge fee(s) indicated below Credit any overpayments
 Charge any additional fee(s) during the pendency of this application
 Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.

FEE CALCULATION

1. BASIC FILING FEE

Large Entity	Small Entity	Fee Description	Fee Paid
Fee Code (\$)	Fee Code (\$)		
1001 750	2001 375	Utility filing fee	
1002 330	2002 165	Design filing fee	
1003 520	2003 260	Plant filing fee	
1004 750	2004 375	Reissue filing fee	
1005 160	2005 80	Provisional filing fee	
SUBTOTAL (1)		(\$ 0)	

2. EXTRA CLAIM FEES

Total Claims	-20 **	=	Extra Claims	Fee from below	Fee Paid
Independent Claims		=	D	X	0
Multiple Dependent	-3 -	=	D	X	0

Large Entity	Small Entity	Fee Description
Fee Code (\$)	Fee Code (\$)	
1202 18	2202 9	Claims in excess of 20
1201 84	2201 42	Independent claims in excess of 3
1203 280	2203 140	Multiple dependent claim, if not paid
1204 84	2204 42	** Reissue independent claims over original patent
1205 18	2205 9	** Reissue claims in excess of 20 and over original patent
SUBTOTAL (2)		(\$ 0)

** or number previously paid, if greater; For Reissues, see above

FEE CALCULATION (continued)

3. ADDITIONAL FEES

Large Entity	Small Entity	Fee Description	Fee Paid
Fee Code (\$)	Fee Code (\$)		
1051 130	2051 65	Surcharge - late filing fee or oath	
1052 50	2052 25	Surcharge - late provisional filing fee or cover sheet	
1053 130	1053 130	Non-English specification	
1912 2,520	1812 2,520	For filing a request for reexamination	
1904 920*	1804 820*	Requesting publication of SIR prior to Examiner action	
1905 1,840*	1805 1,840*	Requesting publication of SIR after Examiner action	
1251 110	2251 55	Extension for reply within first month	
1252 410	2252 205	Extension for reply within second month	
1253 930	2253 485	Extension for reply within third month	
1254 1,150	2254 725	Extension for reply within fourth month	
1255 1,970	2255 985	Extension for reply within fifth month	
1401 320	2401 160	Notice of Appeal	
1402 320	2402 160	Filing a brief in support of an appeal	
1403 280	2403 140	Request for oral hearing	
1451 1,510	1451 1,510	Petition to institute a public use proceeding	
1452 110	2452 55	Petition to revive - unavoidable	
1453 1,300	2453 850	Petition to revive - unintentional	
1501 1,500	2501 650	Utility issue fee (or reissue)	1300
1502 470	2502 235	Design issue fee	
1503 830	2503 315	Plant issue fee	
1460 130	1460 130	Petitions to the Commissioner	
1607 50	1807 50	Processing fee under 37 CFR 1.17 (q)	
1806 180	1606 180	Submission of Information Disclosure Stmt	
6021 40	8021 40	Recording each patent assignment per property (times number of properties)	
1809 750	2809 375	Filing a submission after final rejection (37 CFR § 1.129(a))	
1810 750	2810 375	For each additional invention to be examined (37 CFR § 1.129(b))	
1801 750	2801 375	Request for Continued Examination (RCE)	
1802 900	1802 900	Request for expedited examination of a design application	
Other fee (specify) Publication Fee & Advance Order of Patent Copies		315	

*Reduced by Basic Filing Fee Paid

SUBTOTAL (3)

(\$ 1815)

SUBMITTED BY					
Name (Print/Type)	Carmen Santa Maria	Registration No. Attorney/Agent)	33,453	Telephone	717-237-5226
Signature	Carmen Santa Maria		Date	September 26, 2003	

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PTO/SB/21 (05-03)

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U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

		Application Number	10/086,148
		Filing Date	10/22/2001
		First Named Inventor	RIGNEY et al.
		Art Unit	3726
		Examiner Name	Irene Cuda Rosenbaum
Total Number of Pages in This Submission	6	Attorney Docket Number	13DV-13878 (07783-0094)

ENCLOSURES (check all that apply)

<input checked="" type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment / Response <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/ Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Assignment Papers (for an Application) <input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): Certificate of Facsimile Transmission, Issue Fee Transmittal
Remarks		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm or Individual name	McNees Wallace & Nurick LLC Carmen Santa Maria
Signature	
Date	September 26, 2003

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Typed or printed name	Lindsay Vican	Date	September 26, 2003
Signature			

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